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Bib Data Sheet

CONFIRMATION NO. 1899

|                             |  |              |                        |                                |
|-----------------------------|--|--------------|------------------------|--------------------------------|
| SERIAL NUMBER<br>10/750,934 | FILING OR 371(c)<br>DATE<br>12/31/2003<br>RULE | CLASS<br>424 | GROUP ART UNIT<br>1618 | ATTORNEY DOCKET NO.<br>0101.00 |
|-----------------------------|--|--------------|------------------------|--------------------------------|

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/437,210 12/31/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/04/2004**

|                                 |  |              |                    |
|---------------------------------|--|--------------|--------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  |              |                    |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |              |                    |
| Verified and Acknowledged       | Examiner's Signature Initials  |              |                    |
|                                 |  |              |                    |
| STATE OR COUNTRY                | SHEETS DRAWING   | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| CA                              | 7  | 102          | 7                  |

**ADDRESS**

21968

**TITLE**

Pharmaceutical formulation with an insoluble active agent

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>2590 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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